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То:	Secretary's Office Martin Kennedy Traci Ward Carmen Sellens					Bill M Joyce S Fina L Dave H	am and I cDaniel Smith angley Halferty chwarz	<u>Policy</u>	Administrative Services Alice Knatt Bob Parker Brad Ridley Heidi Burris Mike Branam			G V	Licensure, Certification, and Evaluation Greg Reser Vera VanBruggen Susan Fout				
	Legal Joann Corpstein Greg Wright Susan Andrews					Admir Amy V		n on Agir	n <u>g</u>	Provider Associations Shannon Jones, SILCK Jennifer Schwartz, KACIL KAHSA KHCA/KCAL							
	Independent TCM-FE Providers Stepping Stones Unlimited, LLC																
	PSA PSA PSA	02 A 03 C 04 J 05 J	Annette Greg H ocelyn ohn E.	e Graha oover/ Lyon	am/T Wilr s/Toi n/Ral	homas ner Se n Rya ph L. l	lon/Loris s Winters verns n Barclay	Jones	ones PSA 07 Elizabeth Maxwell/Eugene Highberger PSA 08 Julie Govert-Walter/James Gabelmann PSA 09 Jim Beckwith/Allison Mueller PSA 10 Jodi Abington/Don Bales PSA 11 Dan Goodman/Michael B. Press/ Annabeth Surgaugh K4A Craig Kaberline								
Field S From: Date: RE: (p	Pats: 6/30	y Sam /09	son	FS 2		_	Based Sei	vices for	the Frail	Elderly (H	ICBS/FI	E)					
								rom "Sen ide "Cogi		anion Serv	vice" to	"Compr	ehensive	Support'	' and up	date the	
Check	Appr			cess: d Poli	cy Pı	ocess		KDOA	A/KHPA I	Policy Prod	cess	\boxtimes	Expec	lited Poli	cy Proce	ess	
Policy	Imple		ation T	Γhrou	gh:		KHPA	<u>.</u>		MMIS F	Fiscal A	gent (ED	OS)				
KDOA KHPA						<u>Laura</u> N/A	Graham (<u>(785-296</u>	-7195) an	d Krista E	ngel (78	35-296-0	385)				
Relate Related K.A.R If yes:	d Polic . Cha n Wha	y Nur ige Ro it Refe	nber(s e quire erence): d?	<u>]</u>]	FS-200 No	08-0 <u>5</u>						ber <u>(Sec</u> Change '	tion 3.5) ? Yes			

Q

Proposed effective date

State P If yes:	lan Change Required? What section #(s) Submission Date:	<u>No</u>	Transmittal Number (TN): Supersedes Transmittal Number:	<u> </u>
Waiver	Amendment Required?	No		
Routing	g Information:			
	Internal Route Date:	<u>6/26/09</u>	Internal Comments Due Date:	<u>6/26/09</u>
	Field Route Date:	<u>n/a</u>	Field Comments Due Date:	
	KHPA Route Date:	<u>n/a</u>	KHPA Comments Due Date:	
	KHPA Approval Date:	<u>n/a</u>	KDOA Approval Date:	<u>6/29/09</u>
Trainir	ng Required?			
	KDOA Central Office:	<u>No</u>	KDOA Field Staff:	<u>No</u>
	AAA Staff:	<u>No</u>	Contracted Case Managers:	<u>No</u>
	Customer Education:	<u>No</u>		
	communities.	nition of Medicaid - LTC	Threshold Criteria to reflect current p	oractice.
Final	Policy: This policy ch	nange and implementa	tion date is effective July 1, 20	09.
	Approved	Disapproved		
	/s/			
Secretar	ry of Aging			
Date				